



**TOWN OF MELBOURNE VILLAGE
BUILDING PERMIT APPLICATION**
(Current Code in effect is 2021 Florida Building Code)

For Office Use Only:

Date Rcvd: _____

PERMIT #: _____

TRB Required: _____

Date issued: _____

TRB As-Built: _____

Date of Application: _____

JOB INFORMATION

Project Name: _____

Address: _____

LEGAL DESCRIPTION/PARCEL ID NUMBER/ZONING DESIGNATION

Lot#: _____ or Parcel Id No.: _____ Zoning Design.: _____

Occupancy Group: _____ Construction Type: _____ Floor Area: _____

OWNER INFORMATION Mark if this is an Owner/Builder Permit (no contractor used)

Name: _____

Address: _____ Phone#: _____

City: _____ State: _____ Zip: _____

MORTGAGE LENDER

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

ARCHITECT/ENGINEER

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

WILL THIS PROJECT REQUIRE THE REMOVAL OF ANY TREES? _____

(If YES a separate Tree Removal Permit Application must be submitted – NO TREES may be removed without that permit in hand)

**WILL THIS PROJECT INCREASE THE FOOTPRINT OF THE RESIDENCE OR
BE ADDING A NEW STRUCTURE?** _____

DESCRIPTION OF WORK IN DETAIL: _____

EST. VALUE OF CONSTRUCTION: _____

CONTRACTOR INFORMATION

Company Name: _____

Qualifier's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

State Certification #: _____ Phone #: _____

Certificate of Competency: _____

Contact person's name & phone: _____ (If different than above)

SUBCONTRACTOR INFORMATION

Electrical Contractor: _____	Phone #: _____
Address: _____	Cert # _____
Plumbing Contractor: _____	Phone #: _____
Address: _____	Cert # _____
Mechanical Contractor: _____	Phone #: _____
Address: _____	Cert #: _____
Gas Contractor: _____	Phone #: _____
Address: _____	Cert #: _____
Roofing Contractor: _____	Phone #: _____
Address: _____	Cert #: _____
Lead Certification: _____	Phone #: _____
Address: _____	Cert #: _____

APPLICANT'S AFFIDAVIT

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be obtained for pools, signs, fences, etc. or electrical work, plumbing, heating, ventilation and air conditioning (unless listed above) septic systems, and for tree removal.

LEAD RRP NOTICE: I certify that I am aware of the lead requirements under the Federal Lead Renovation, Repair and Painting Rule.

OWNER AFFIDAVIT: I certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ANY ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

OWNER/AGENT SIGNATURE
(Agent Appointment Document, if applicable)

CONTRACTOR SIGNATURE

STATE OF FLORIDA
COUNTY OF BREVARD

STATE OF FLORIDA
COUNTY OF BREVARD

The foregoing instrument was acknowledged before me this ____ day of _____ (year) by _____ who is personally known to me, or has produced _____ as identification and who did not take an oath.

The foregoing instrument was acknowledged before me this ____ day of _____ (year) by _____ who is personally known to me, or has produced _____ as identification and who did not take an oath.

Signature of Notary Public

Signature of Notary Public

Print Name: _____
Title: _____
Commission #: _____
(or stamp)

Print Name: _____
Title: _____
Commission #: _____
(or stamp)